

## IMA BAND PERSONNEL FORM

Name of Institution: \_\_\_\_\_ Fax No: \_\_\_\_\_  
 Director of Bands: \_\_\_\_\_ School Phone: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Submit the names and other pertinent information related to the students who you recommend for the IMA Band. These persons are to be your first choice. Please evaluate (rate) each student on their ability to perform Grade V-VI (medium difficult and difficult) music with a **minimum** of rehearsals.

Use the following scale: 1-Excellent; 2-Very Good; 3-Average; 4-Fair

Name	Instrument	Class	Performance Evaluation	M	F
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—

- \*PLEASE INDICATE IF FLUTE DOUBLES ON PICCOLO**
- \*\*PLEASE INDICATE IF PERCUSSION PLAYS MALLETS**
- \*\*\*PLEASE INDICATE IF THEY WOULD BE GOOD FOR IMA JAZZ BAND**

Submit three additional names and other pertinent information related to the students who you would recommend for the IMA Band if the quota were larger. These persons will be considered (as part of the eight to be selected from your organization) only if a 'balanced' instrumentation does not result from the original choices of the band directors.

Name	Instrument	Class	Performance Evaluation	M	F
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—
_____	_____	_____	_____	—	—

Please complete and return to:

Harold L. Jeffreys-Music Department  
 Saint Augustine's University  
 1315 Oakwood Ave.  
 Raleigh, NC 27610

Office: 919-516-4080  
 Fax: 919-516-4413  
 Home: 919-779-5530  
 E-mail: hljeffreys@st-aug.edu